

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

**10091206**

## CLAIMS AS FILED - PART I

|   | (Column 1)             | (Column 2)   |
|---|------------------------|--------------|
| TOTAL CLAIMS  | <b>19</b>              |              |
| FOR   | NUMBER FILED           | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | <b>17</b> minus 20 = * | —            |
| INDEPENDENT CLAIMS  | <b>3</b> minus 3 = *   | —            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |                        |              |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE      | FEE    |    | RATE      | FEE        |
|-----------|--------|----|-----------|------------|
| BASIC FEE | 370.00 | OR | BASIC FEE | 740.00     |
| X\$ 9=    |        | OR | X\$18=    |            |
| X42=      |        | OR | X84=      |            |
| +140=     |        | OR | +280=     |            |
| TOTAL     |        | OR | TOTAL     | <b>740</b> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

**10-6-05**

|   | (Column 1)                       |             | (Column 2)                         |              | (Column 3)    |
|---|----------------------------------|-------------|------------------------------------|--------------|---------------|
| AMENDMENT A   |                                  |             |                                    |              |               |
|   | CLAIMS REMAINING AFTER AMENDMENT |             | HIGHEST NUMBER PREVIOUSLY PAID FOR |              | PRESENT EXTRA |
|   | Total                            | * <b>17</b> | Minus                              | ** <b>20</b> | =             |
|   | Independent                      | * <b>3</b>  | Minus                              | *** <b>3</b> | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |             |                                    |              |               |

| RATE             | ADDI-TIONAL FEE |    | RATE             | ADDI-TIONAL FEE |
|------------------|-----------------|----|------------------|-----------------|
| X\$ 9=           |                 | OR | X\$18=           |                 |
| X42=             |                 | OR | X84=             |                 |
| +140=            |                 | OR | +280=            |                 |
| TOTAL ADDIT. FEE |                 | OR | TOTAL ADDIT. FEE |                 |

|   | (Column 1)                       |   | (Column 2)                         |     | (Column 3)    |
|---|----------------------------------|---|------------------------------------|-----|---------------|
| AMENDMENT B   |                                  |   |                                    |     |               |
|   | CLAIMS REMAINING AFTER AMENDMENT |   | HIGHEST NUMBER PREVIOUSLY PAID FOR |     | PRESENT EXTRA |
|   | Total                            | * | Minus                              | **  | =             |
|   | Independent                      | * | Minus                              | *** | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |   |                                    |     |               |

| RATE             | ADDI-TIONAL FEE |    | RATE             | ADDI-TIONAL FEE |
|------------------|-----------------|----|------------------|-----------------|
| X\$ 9=           |                 | OR | X\$18=           |                 |
| X42=             |                 | OR | X84=             |                 |
| +140=            |                 | OR | +280=            |                 |
| TOTAL ADDIT. FEE |                 | OR | TOTAL ADDIT. FEE |                 |

|   | (Column 1)                       |   | (Column 2)                         |     | (Column 3)    |
|---|----------------------------------|---|------------------------------------|-----|---------------|
| AMENDMENT C   |                                  |   |                                    |     |               |
|   | CLAIMS REMAINING AFTER AMENDMENT |   | HIGHEST NUMBER PREVIOUSLY PAID FOR |     | PRESENT EXTRA |
|   | Total                            | * | Minus                              | **  | =             |
|   | Independent                      | * | Minus                              | *** | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |   |                                    |     |               |

| RATE             | ADDI-TIONAL FEE |    | RATE             | ADDI-TIONAL FEE |
|------------------|-----------------|----|------------------|-----------------|
| X\$ 9=           |                 | OR | X\$18=           |                 |
| X42=             |                 | OR | X84=             |                 |
| +140=            |                 | OR | +280=            |                 |
| TOTAL ADDIT. FEE |                 | OR | TOTAL ADDIT. FEE |                 |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.